

**UNITED STATES HOUSE OF REPRESENTATIVES**  
**2018 FINANCIAL DISCLOSURE STATEMENT**

For Use by Members, Officers, and Employees

*M*AY 15, 2019  
 OFFICE OF THE CHIEF CLERK  
 UNITED STATES HOUSE OF REPRESENTATIVES  
 (Office Use Only)

**Form A**

Name: John B. Larson

Daytime Telephone: 202-225-2265

A \$200 penalty will be imposed against any individual who files more than 30 days late.

**HAND**

FILER STATUS	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives	State: CT _____	Officer or Employee _____	Staff Filer Type: (If Applicable) Shared <input type="checkbox"/> Principal Assistant <input type="checkbox"/>
REPORT TYPE	<input checked="" type="checkbox"/> 2018 Annual (Due: May 15, 2019)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination	Date of Termination: _____

**PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS**

A. Did you, your spouse, or your dependent child:	a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? <input checked="" type="checkbox"/> b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
B. Did you, your spouse, or your dependent child purchase, sell, or exchange any securities or reportable real estate in a transaction exceeding \$1,000 during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	G. Did you, your spouse, or your dependent child receive any reportable gift(s) totaling more than \$390 in value from a single source during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	H. Did you, your spouse, or your dependent child receive any reportable travel or reimbursements for travel totaling more than \$390 in value from a single source during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	I. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article during the reporting period?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	<b>ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"</b>		

**IPO AND EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER EACH OF THESE QUESTIONS**

**IPO** – Did you purchase any shares that were allocated as a part of an Initial Public Offering during the reporting period? If you answered "yes" to this question, please contact the Committee on Ethics for further guidance.

**TRUSTS** – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?

**EXEMPTION** – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or your dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.

Yes  No

Yes  No

Yes  No

Yes  No

## **SCHEDULE A – ASSETS & “UNEARNED INCOME”**

Name: John B. Larson

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BLOCK A												BLOCK B												BLOCK C												BLOCK D												BLOCK E																							
Assets and/or Income Sources												Value of Asset												Type of Income												Amount of Income												Transaction																							
(Indicate if the production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income that generated more than \$200 in "unearned" income during the year.)												Indicate value of asset at close of the reporting period. If you use a valuation method other than fair market value, please specify the method used.												Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k), IRA, or 529 accounts), you may check the "Tax-Deferred" category of income by checking the appropriate box below.												For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets indicate the asset had all interest-bearing accounts, if the total is over \$4,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts.												Indicate if the asset was sold during the reporting period and is included only because it generated income, the value should be "None."																							
(Provide complete names of stocks and mutual funds (no use only ticker symbols)).												(For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds).												(For bank and other cash accounts, total the amount in all interest-bearing accounts, if the total is over \$4,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts).												(For rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state).												(If an asset was sold during the reporting period and is included only because it generated income, the value should be "None." "Column M is for assets held by your spouse or dependent child in which you have no interest.																							
(For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.)												(For an ownership interest in a privately-held fund that is an Excepted Investment Fund, please check the "EIF" box).												(If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (UT), in the optional column on the far left).												(If you report a privately-held fund that is an Excepted Investment Fund, please check the "EIF" box).												(If only a portion of an asset was sold, please indicate as follows: (S) (part), (L) (part), (E) (part), or (X) (none).)																							
(For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.)												(None)												(None)												(None)												(None)																							
												\$1-\$1,000												\$1-\$200												\$1-\$200												(S)(part)																							
												\$1,001-\$15,000												\$201-\$1,000												\$201-\$1,000												(L)(part)																							
												\$15,001-\$50,000												\$1,001-\$2,500												\$1,001-\$2,500												(E)(part)																							
												\$50,001-\$100,000												\$2,501-\$5,000												\$2,501-\$5,000												(X)(none)																							
												\$100,001-\$250,000												\$5,001-\$15,000												\$5,001-\$15,000												(None)																							
												\$250,001-\$500,000												\$15,001-\$50,000												\$15,001-\$50,000												(None)																							
												\$500,001-\$1,000,000												\$50,001-\$100,000												\$50,001-\$100,000												(None)																							
												\$1,000,001-\$5,000,000												\$100,001-\$1,000,000												\$100,001-\$1,000,000												(None)																							
												\$5,000,001-\$25,000,000												\$1,000,001-\$5,000,000												\$1,000,001-\$5,000,000												(None)																							
												\$25,000,001-\$50,000,000												\$25,000,001-\$50,000,000												\$25,000,001-\$50,000,000												(None)																							
												Over \$50,000,000												Over \$5,000,000												Over \$5,000,000												(None)																							
												Spouse/DC Asset over \$1,000,000*												Spouse/DC Asset with Income over \$1,000,000*												Spouse/DC Asset with Income over \$1,000,000*												(None)																							
SP, DC, IT	SP Examples:	Mega Corp. Stock	EE									I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII	S(part)	P, S, S(part), or E																																														
		Simon & Schuster																																																																					
		ABC Hedge Fund	X									X																																																											
American Eagle FCU												X												X												X												X																							
Fidelity Investments												X												X												X												X																							
SEP IRA												XX												XX												XX												XX																							
Adobe Sys (ADBE)												X												X												X												X																							
Alcoa Int'l												X												X												X												X																							

## **SCHEDULE A – ASSETS & “UNEARNED INCOME”**

Name: John B. Larson

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Use additional sheets if more space is required.

## **SCHEDULE A – ASSETS & “UNEARNED INCOME”**

Name: John B. Larson

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**Use additional sheets if more space is required.**

**SCHEDULE A – ASSETS & “UNEARNED INCOME”**

Name: John B. Larson

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BLOCK A Assets and/or Income Sources		BLOCK B Value of Asset												BLOCK C Type of Income		BLOCK D Amount of Income		BLOCK E Transaction								
SP. DC JF	ASSET NAME	A	B	C	D	E	F	G	H	I	J	K	L	M	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII
SP	Congressional FCU													None												
SP	JT Bank of America	X												\$1-\$1,000												
SP	State of CT Deferred Compensation 457 Plan (Prudential Retirement)													\$1,001-\$15,000												
SP	CT Stable Fund													\$15,001-\$50,000												
SP	Metro West Total Ret													\$50,001-\$100,000												
SP	Vanguard Total BD Mkt													\$100,001-\$250,000												
SP	Vanguard INFL - PROT													\$250,001-\$500,000												
SP	American FD - AM Mutual													\$500,001-\$1,000,000												
SP	Fidelity VLP Contra FD	X												\$1,000,001-\$5,000,000												
SP	TIAA-CREF LgCapGr	X												\$5,000,001-\$25,000,000												
SP	Vanguard Instl Index	X												Over \$50,000,000												
SP	JP Morgan MD CP Value													Spouse/DC Asset over \$1,000,000*												
SP	Vanguard Explorer ADM													NONE												
														DIVIDENDS												
														RENT												
														INTEREST												
														CAPITAL GAINS												
														EXCEPTED/BLIND TRUST												
														TAX-DEFERRED												
														Other Type of Income (Specify: e.g., Partnership Income or Farm Income)												
														None												
														\$1-\$200												
														\$201-\$1,000												
														\$1,001-\$2,500												
														\$2,501-\$5,000												
														\$5,001-\$15,000												
														\$15,001-\$50,000												
														\$50,001-\$100,000												
														\$100,001-\$1,000,000												
														\$1,000,001-\$5,000,000												
														Over \$5,000,000												
														Spouse/DC Asset with Income over \$1,000,000*												
														P, S, SI (part), or E												

Use additional sheets if more space is required.

**SCHEDULE A – ASSETS & “UNEARNED INCOME”**

Name: John B. Larson

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BLOCK A Assets and/or Income Sources			BLOCK B Value of Asset												BLOCK C Type of Income			BLOCK D Amount of Income			BLOCK E Transaction			
SP. IC. JT.	ASSET NAME	E/F																						
			A	B	C	D	E	F	G	H	I	J	K	L	M	I	II	III	IV	V	VI	VII	VIII	IX
			None																					
			\$1-\$1,000																					
			\$1,001-\$15,000																					
			\$15,001-\$50,000																					
			\$50,001-\$100,000																					
			\$100,001-\$250,000																					
			\$250,001-\$500,000																					
			\$500,001-\$1,000,000																					
			\$1,000,001-\$5,000,000																					
			\$5,000,001-\$25,000,000																					
			\$25,000,001-\$50,000,000																					
			Over \$50,000,000																					
			Spouse/DC Asset over \$1,000,000*																					
			NONE																					
			DIVIDENDS																					
			RENT																					
			INTEREST																					
			CAPITAL GAINS																					
			EXCEPTED/BLIND TRUST																					
			TAX-DEFERRED																					
			Other Type of Income (Specify, e.g., Partnership Income or Farm Income)																					
			None																					
			\$1-\$200																					
			\$201-\$1,000																					
			\$1,001-\$2,500																					
			\$2,501-\$5,000																					
			\$5,001-\$15,000																					
			\$15,001-\$50,000																					
			\$50,001-\$100,000																					
			\$100,001-\$1,000,000																					
			\$1,000,001-\$5,000,000																					
			Over \$5,000,000																					
			Spouse/DC Asset with Income over \$1,000,000*																					
			P, S, S(p), or E																					

## SCHEDULE B – TRANSACTIONS

Name: John B. Larson

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SP, DC, JI	Example	Asset	Type of Transaction		Date	Amount of Transaction									K	
			Purchase	Sale		(M/DAY/R) or Quarterly, Monthly or Bi- Weekly, if applicable	A	B	C	D	E	F	G	H	I	
	Mega Corp Stock					Check Box if Capital Gain Exceeded \$200										
Mettler-Toledo Intl		X		X	1/12/18	X										
Illumina Inc		X		X	2/1/18	X										
Eversource Energy Com		X		X	2/2/18	X										
HSBC HLDGS PLC		X		X	2/21/18	X										
Starbucks Corp		X		X	2/27/18	X										
Kinder Morgan Inc		X		X	3/6/18	X										
Nielsen Hldgs PLC		X		X	3/7/18	X										
Enbridge Inc		X		X	4/25/18	X										
General Dynamics CRP				X	4/25/18	X										
Mettler-Toledo		X		X	4/25/18	X										
Raytheon Co		X		X	4/25/18	X										
HSBC HLDGS PLC		X		X	5/4/18	X										
Westlake Chem Corp		X		X	6/21/18	X										
Adobe Sys Inc				X	8/1/18	X										
Amphenol Corp				X	8/1/18	X										
Apple Inc				X	8/1/18	X										
Citigroup Inc				X	8/1/18	X										
Danaher Corp Com				X	8/1/18	X										
Fortive Corp Com				X	8/1/18	X										

Use additional sheets if more space is required.

Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting period of any security or real property held by you, your spouse, or your dependent child for investment or the production of income. Include transactions that resulted in capital loss. Provide a brief description of an exchange transaction. Exclude transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose "partial sale" as the type of transaction.

**Capital Gains:** If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an asset in a tax-deferred account, and disclose the capital gain income on Schedule A.

\* Column K is for assets solely held by your spouse or dependent child.

## SCHEDULE B – TRANSACTIONS

Name: John B. Larson

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SP, DC, JT	Example	Mega Corp. Stock	Type of Transaction		Date	Amount of Transaction													
			Purchase	Sale		Partial Sale	Exchange	(MODA/MR)	A	B	C	D	E.	F	G	H	I	J	K
	Home Depot Inc		X		8/1/18	X		Quarterly, Monthly, or Bi-weekly, if applicable	\$1,001-\$15,000	\$15,001-\$50,000	\$50,001-\$100,000	\$100,001-\$250,000	\$250,001-\$500,000	\$500,001-\$1,000,000	\$1,000,001-\$5,000,000	\$5,000,001-\$25,000,000	\$25,000,001-\$50,000,000	Over \$50,000,000	Over \$1,000,000* (Spouse/DC Asset)
	JP Morgan Chase & Co		X		8/1/18	X													
	Kinder Morgan Inc Com		X		8/1/18	X													
	Mastercard Incorporated		X		8/1/18	X													
	McDonalds Corp		X		8/1/18	X													
	Mettler-Toledo Intl		X		8/1/18	X													
	Microsoft Corp		X		8/1/18	X													
	Nestle		X		8/1/18	X													
	RBC Bearings		X		8/1/18	X													
	Starbucks Corp		X		8/1/18	X													
	Thermo Fisher Scientific Inc		X		8/1/18	X													
	Transcanada Corp		X		8/1/18	X													
	Westlake Chem Corp		X		8/1/18	X													
	Weyerhaeuser Co		X		8/1/18	X													
	Zoetis Inc Com		X		8/1/18	X													
	United States Treasury		X		8/2/18	X													
	United States Treasury		X		8/2/18	X													
	Mondelez Int		X		8/1/18	X													
	Adobe Sys Inc		X		10/5/18	X													

Use additional sheets if more space is required.

Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the reporting period of any security or real property held by you, your spouse, or your dependent child for investment or the production of income. Include transactions that resulted in a capital loss. Provide a brief description of an exchange transaction. Exchange transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose "partial sale" as the type of transaction.

**Capital Gains:** If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an asset in a tax-deferred account, and disclose the capital gain income on Schedule A.

\*Column K is for assets solely held by your spouse or dependent child.

**SCHEDULE B - TRANSACTIONS**

Name: John B. Larson

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**Report** any purchases, sale, or exchange transactions that exceeded \$1,000 in the reporting period or any security or real property held by you, your spouse, or your dependent child for investment or the production of income. Include transactions that resulted in a capital loss. Provide a brief description of an exchange transaction. Exclude transactions between you, your spouse, or dependent children, or the purchase or sale of your personal residence, unless it generated rental income. If only a portion of an asset is sold, please choose "partial sale" as the type of transaction.

**Capital Gains:** If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an asset in a tax-deferred account, and disclose the capital gain information Schedule A.

**Capital Gains:** If a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box, unless it was an asset in a tax-deferred account, and disclose the capital gain income on Schedule A.

**ASSET**  
SP, DC, JT  
CONTRIBUTIONS FOR ASSETS BORROWED BY YOUR SPOUSE OR SPONSOR FROM ANOTHER SOURCE

**SCHEDULE C – EARNED INCOME**

Name: John B. Larson

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

**EXCLUDE:** Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

**INCOME LIMITS and PROHIBITED INCOME:** The 2018 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$28,050. The 2019 limit is \$28,440. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.

**EXCLUDE:** Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

### **al Security Act.**

<b>EXCLUDE:</b> Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.
<b>INCOME LIMITS and PROHIBITED INCOME:</b> The 2018 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$28,050. The 2019 limit is \$28,440. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.

**SCHEDULE D – LIABILITIES**

Name: John B. Larson

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**Report liabilities of over \$10,000 owed to any one creditor at any time** during the reporting period by you, your spouse, or your dependent child. **Mark the highest amount owed during the reporting period.** **Members:** Members are required to report all liabilities secured by real property including mortgages on their personal residence. **Exclude:** Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. **Report a revolving charge account** (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. \*Column K is for liabilities held solely by your spouse or dependent child.

## SCHEDULE E – POSITIONS

**Report all positions, compensated or uncompensated held during the current or prior calendar year, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.**

Use additional sheets if more space is required.

## SCHEDULE H – TRAVEL PAYMENTS and REIMBURSEMENTSS

Name: John B. Larson

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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$390 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

**EXCLUDE:** Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to the filer.

Source	Date(s)	City of Departure-Destination-City of Return	Locking? (Y/N)	Food? (Y/N)	Family Member Included? (Y/N)
Government of China (MECEA)	Aug. 6-11	DC-BEIJING, China-DC	Y	Y	N
Habitat for Humanity (charity fundraiser)	Aug. 24-26	DC-BEIJING, China-DC	Y	Y	Y

**Use additional sheets if more space is required.**

**FILER NOTES  
(Optional)**

Name: John B. Larson

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NOTE NUMBER	NOTES
1.	<p>Bank of America - Fixed Term IRA is listed on both Schedule A and Schedule C.</p> <p>A distribution of \$1,676.32 was taken from that IRA in calendar year 2018 that brought the end of year balance to zero.</p>

**Use additional sheets if more space is required.**